

Attachment 6

Draft Permit and License Application Process for Cannabis Businesses



APPLICATION PROCEDURE TO OPERATE A COMMERCIAL CANNABIS BUSINESS IN UNION CITY

The application process to operate a Commercial Cannabis Business (“CCB”) in Union City will open on Wednesday, **October 11, 2017**. Applications will be available at the Economic & Community Development Department located at City Hall. For questions regarding the application process please review the FAQ’s, at the Union City webpage: www.ci.union-city.ca.us. This outlines the application process, required materials, and other information necessary to operate a CCB in Union City. To be considered, final applications **must be** submitted by **4:00 PM on Friday, November 10, 2017** at the Economic & Community Development Department located at 34009 Alvarado-Niles Road, Union City, CA, 94587. This application process is adopted pursuant to the Union City Municipal Code Section 5.44.010, 5.44.040, and 5.44.090.

BEFORE YOU APPLY:

- Review the information to learn about the application process and which documents you will need.
- Review the application in its entirety to ensure that it is complete and accurate.
- Review the information regarding the commercial cannabis business permit application on the City webpage: www.ci.union-city.ca.us which includes the following information:
 - Local regulations governing Union City CCB’s: Union City Municipal Code (“UCMC”) Chapters 5.44.010, 5.44.040, and 5.44.090.
 - Background authorization form and/or Live Scan
 - Additional application information: Ordinance **No. XX-XXX**.
 - Medical and Adult-Use Cannabis Regulation and Safety Act (MAUCRSA)
 - Title 5.44
 - Local Zoning Ordinances Title 18
 - Frequently Asked Questions

- (1) **Application Process: Evaluation and Ranking:** The selection process shall consist of the following Four Phases:

Phase 1: Preliminary determination of eligibility. \$X,XXX

Phase 2: Initial ranking. \$X,XXX

Phase 3: Second ranking. \$X,XXX

Phase 4: City Managers Final Recommendation to City Council. \$X,XXX

For more information, see Evaluation and Selection Process below.

- (2) **Criminal History Check:** As part of Phase 1 of the Application Process each principal/owner must undergo a criminal background check demonstrating that they do not provide “good cause” for denial per UCMC Section 5.44.070 (d) or 5.44.300(m), and the background check fee shall be **\$XXX**. The application for the Live Scan will be available on the City website or at the Economic & Community Development Department in City Hall. Please provide proof of completing your background form and/or Live Scan form by providing proof of a receipt with your application on or before November 10, 2017. This process will be required to meet the minimum threshold qualifications pursuant to UCMC Section 5.44.090. Principals who do not meet criminal history eligibility requirements will be disqualified.

- (3) Applicants will be required to obtain a **“Zoning Verification Letter”** from the Economic & Community

Development Department in City Hall, located at 34009 Alvarado-Niles Road, to ensure that the location proposal the applicant is applying for meets locational requirements prior to submitting their CCB application. The review process typically takes approximately ten (10) working days and will cost **\$XXX**. The "Zoning Verification Letter" will need to be included with the application package. Please note the issuance of a "Zoning Verification Letter" does not mean the written evidence of permission given by the City of Union City or any of its officials to operate a CCB, nor does it not mean "permit" within the meaning of the Permit Streamlining Act, nor does it constitute an entitlement under the Zoning or Building Code. A regulatory permit for regulating a CCB does not constitute a permit that runs with the land on which the CCB is established. Request for Zoning Verification Letters require a written request from the Economic & Community Development Department and will not be completed over the counter since it may require additional research and review.

- (4) **Application:** Applicants must hand deliver two (2) complete comprehensive and signed copies of the City of Union City Commercial Cannabis Business Form, and all attachments, if any, along with a flash drive which contains one comprehensive and signed copy of the application in a pdf format, and payment of **\$X,XXX** for the initial application fee by **4:00 PM on Tuesday October 31, 2017**. Payment must be made by a certified check, cashier's check or money order made payable to the City of Union City. Please note the City will not accept cash and Application Fees are non-refundable. A complete application will consist of the following information:
- a. The City of Union City Commercial Cannabis Business Form;
 - b. Background Authorization Form and/or Proof of Live Scan payment for each of the Principals;
 - c. Zoning Verification Letter; and
 - d. All the information about the CCB to be evaluated in Phase 1, Phase 2 and Phase 3 which is described in the Application and Evaluation Process section below in this procedure. The only information that can be submitted after the initial application is proof of property ownership or lease agreement. However, any change in location will require a new "Zoning Verification Letter" and must be submitted with the application package prior to being interviewed as part of Phase 3 of the selection process. Please note that should you choose to submit a different location prior to Phase 3 you can only do so if your initial proposed site was approved as part of your original application package on or before November 10, 2017.

LATE APPLICATIONS WILL NOT BE CONSIDERED.

(5) **Amendments to the Application:** Applicants will not be allowed to make amendments to their application or to supplement their application, except as otherwise specifically permitted in these procedures or as authorized in writing by the City Manager or his/her designee. During Phase 1, applicants will be notified if any of the Principals are ineligible and/or if their application is incomplete and will not move forward in the application process. However, in some cases the City may move forward in the application process to other phases should it anticipate that the Live Scan or background check may be delayed expediting the application process in a timely manner. In this case Applicants wishing to move forward in the process acknowledge by signing the application that they agree to these terms and should they be disqualified because of a background or a Live Scan disqualification they will not be eligible for a refund of any fees collected resulting from the modification of this procedure.

(6) **Payment of Application Fees:** The individual designated as the CCB contact on the application will be notified by e-mail as to whether the application is advancing to Phase 2 and, subsequently, to Phase 3. A payment of **\$X,XXX** will be due before Phase 2 and a payment of **\$X,XXX** will be due before Phase 3. As part of Phase 4 all eligible Applicants as determined by the Ordinance or by resolution will be presented to City Council and must pay a fee of **\$X,XXX** to move forward for final consideration. Deadlines for these payments will be included in the e-mail notification to the primary contact person.

EVALUATION AND SELECTION PROCESS:

The evaluation and selection process shall consist of the following four phases:

➤ **Phase 1: Determination of Eligibility and Application**

- Each Principal must undergo a criminal history check demonstrating compliance with the eligibility requirements of UCMC Section 5.44.070 (d) and 5.44.300 (m).
- Applications must be complete to be considered. Applications will be considered complete only if they include all the information required for Phases 1, 2, and 3.
- Proposed location of business.
- Execute an agreement indemnifying the City from liability.

➤ **Phase 2: Initial Ranking (1,500 Points)**

- Applications will be evaluated based on the following criteria:
 - Proposed Location of business (200 Points)
 - Business Plan (400 Points)
 - Neighborhood Compatibility Plan (300 Points)
 - Safety and Security Plan (300 Points)
 - Air Quality Plan (100 Points)
 - Labor and Employment Plan (200 Points)
- Those applicants who scored a minimum of 80% in Phase 2 will move on to Phase 3.

➤ **Phase 3: Second Ranking (2,500 Points)**

- All applications who score at least 80% in Phase 2, will be interviewed and evaluated by the Selection Committee based on the criteria listed below.
- Prior to the scheduling of the interviews in Phase 3 each of the applicants will be required to have their proposed site inspected by the assigned City designee to ascertain current conditions of the facility.
- The second ranking will be scored based on the following criteria:
 - Final Location (proof of ownership or a signed and notarized statement from the Property Owner (200 Points)
 - Business Plan (300 Points)
 - Community Benefits (300 Points)
 - Enhanced Product Safety (200 Points)
 - Environmental Benefits (200 Points)
 - Labor & Employment (200 Points)
 - Local Enterprise (200 Points)
 - Neighborhood Compatibility Plan (200 Points)
 - Qualifications of Principals (300)
 - Safety and Security Plan (200 Points)
 - Air Quality Plan (200 Points)
- After all the applicants from Phase 3 scores have been tabulated they will be combined with Phase 2 to establish a new ranking of the top applicants. All the applicants who continued to maintain a score of at least 80% or as determined by resolution will move onto Phase 4 of the selection process.

➤ **Phase 4: City Manager's Recommendations and City Council's Final Approval**

Phase 4 Steps to be followed:

1. Selection Committee's final review and evaluation.
2. City Manager presents final rankings and recommendation report to City Council.
3. City Council Approves Final recommendations.

After Phase 3, and before Phase 4, the final applicants chosen from each category shall participate in a public meeting which will be held in the City of Union City Council Chambers on a date and time to be determined by City staff. Notice of the public meeting shall be noticed in the same manner pursuant to UCMC Section 18.52.082. Notice of the public meeting shall be sent to all property owners located within three hundred (300) feet of the proposed business locations of each of the top finalists in each permitted category.

At the Public Meeting, the community will be allowed to present concerns and/or support and provide additional considerations for potential permit conditions that may be implemented by staff. The Public Meeting will not be determinative as to who gets the permit but shall inform staff of potential concerns for which a condition or conditions may be necessary to address. Furthermore, decisions, recommendations, and conditions will be based primarily on-site inspection results, business feasibility, and the viability of the proposed location. After the completion of the Public Meeting and prior to the Selection Committee's final recommendation to City Council, the City reserves the right to request and obtain additional information from any candidate who submitted a proposal. Upon the completion of the final review process, the Selection Committee will tabulate its final scores of the all applicants who were interviewed in Phase 3. The City Manager will present to the City Council the final ranking along with his/her recommendation in which the City Council may award up to the amount permitted by UCMC Section 5.44.080 (a). The City Council reserves the right to award a lesser number of permits, or to award no permits at all. Only those applicants on the final list will be eligible to be issued a permit from the initial permit process. The top Applicants which are being recommended by the City Manager for consideration to the City Council should be prepared to attend a City Council meeting in City of Union City to provide a public presentation before the Mayor and City Council introducing their team and providing an overview of their proposal if requested by the City Manager.

- Please note that being awarded a CCB does not constitute a land use entitlement and does not waive or remove the requirements of applying for and receiving permits for all construction including electrical, plumbing, fire, planning permits or reviews, and any other permits, licenses, or reviews as may be necessary by the relevant departments or governmental entities in charge of said permits. Nor does it guarantee that the plans submitted via the CCB application process meet the standards or requirements in Chapter 18 and any other permit requirements from other city departments or agencies.

DESCRIPTION OF EVALUATION CRITERIA:

- **Proposed Location.** Your application must include the address and a detailed description of the proposed location. (Note that proof of ownership, or a notarized letter of the owner's willingness to lease will not be given any additional consideration until Phase 3). This section should also describe all sensitive uses described in within six hundred (600) feet of the proposed location from the property line of a K-12 school, daycare center and youth center. The CCB must be in the appropriate zoning and meet all the locational requirements as described in UCMC Chapter 18.12.010, UCMC Chapter 5.44.090 and 5.44.170.
- **Business Plan.** With as much detail as possible, the Business Plan should describe:
 - Description of day-to-day operations which meet industry best practices for the specific type of permit in which they will be applying for in the City.
 - How the CCB will conform to local and state law. See UCMC Sections 5.44.040, 5.44.210, 5.44.260, 5.44.280, 5.44.300 and Ordinance XX-XXX.
 - Mechanisms for ensuring that the CCB will operate on a Not-for-Profit basis if for medical cannabis until the Medicinal and Adult-Use Cannabis Regulation and Safety Act (MAUCRSA) is fully in effect

- or until amendments are made to Chapter 5.44.
- How medical and adult-use will be tracked and monitored to prevent diversion.
- A schedule for beginning operation, including a narrative outlining any proposed construction and improvements and a timeline for completion.

The Business Plan should include:

- A **budget** for construction, operation, maintenance, compensation of employees, equipment costs, utility costs, and other operation costs. The budget must demonstrate sufficient capital in place to pay startup costs and at least three months of operating costs, as well as a description of the sources and uses of funds.
Proof of capitalization, in the form of documentation of cash or other liquid assets on hand, Letters of Credit or other equivalent assets.
 - A **pro forma** for at least three years of operation.
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- **Neighborhood Compatibility Plan.** For the proposed location, your application should address how the CCB, including its exterior areas and surrounding public areas, will be managed, to avoid becoming a nuisance or having impacts on its neighbors and the surrounding community. Furthermore, a site plan (accurate, dimensioned and to-scale [minimum scale of 1/4"]) should be included for each potential location.
 - **Safety and Security Plan.** For each proposed location, your application should include:
 - A detailed **safety plan**. This plan should describe the fire prevention, suppression, HVAC and alarm systems the facility will have in place. **It should include an assessment of the facility's fire safety by a qualified licensed fire prevention and suppression consultant.** An appropriate plan will have considered all possible fire, hazardous material, and inhalation issues/threats and will have both written and physical mechanisms in place to deal with each specific situation.
 - A detailed **security plan**. This plan should include a description and detailed schematic of the overall facility security. It should have details on operational security, including but not limited to general security policies for the facility, employee specific policies, training, sample written policies, transactional security, visitor security, 3rd party contractor security, and delivery security. In particular, applications should address ingress and egress access, perimeter security, product security (at all hours), internal security measures for access (area specific), types of security systems (alarms and cameras), and security personnel to be employed. **The security plan shall also include an assessment of site security by a qualified licensed security consultant.** Security plans will not be made public.
 - A **floor plan** showing existing conditions. If changes are proposed as part of the project, then a proposed floor plan should also be submitted. The floor plan(s) should be accurate, dimensioned and to-scale (minimum scale of 1/4").
 - **Community Benefits.** The application should describe benefits that the CCB would provide to the local community, such as employment for residents of the City, community contributions, or economic incentives to the City.
 - **Enhanced Product Safety.** The application should state how the CCB will ensure enhanced consumer safety as required by State and/or local law.
 - **Environmental Benefits.** The application should describe any proposed "green" business practices relating to energy and climate, water conservation, and materials and waste management.
 - **Labor & Employment.** The application should describe to what extent the CCB will adhere to heightened pay and benefits standards and practices, including recognition of the collective bargaining rights of employees. Specific practices that are subject to consideration include the following:
 - Providing compensation to and opportunities for continuing education and training of employees/staff (applications should provide proof of the CCB policy and regulations to employees);
 - Providing a "living wage" to facility staff and employees. Wage scale should be provided in writing for all levels of employment at the facility. "Living Wage" shall mean 150% of the minimum wage mandated by California or Federal law, whichever is greater.
 - **Local Enterprise.** The application should state the extent to which the CCB will be a locally

- managed enterprise whose Principals reside within Union City and/or the County of Alameda.
- **Qualifications of Principals.** The application should include information concerning any special business or professional qualifications or licenses of principals that would add to the number or quality of services that the CCB would provide, especially in areas related to medical cannabis, such as scientific or health care fields.
 - **Air Quality Plan.** Must demonstrate the air circulation does not impact the employees' health and welfare nor the surrounding businesses.


The City's Reservation of Right's

The City reserves the right to reject any and/or all proposals, with or without any cause or reason. The City may also, modify, postpone, or cancel the request for permit applications without liability, obligation, or commitment to any party, firm, or organization. In addition, the City reserves the right to request and obtain additional information from any candidate submitting a proposal. Late proposals WILL BE REJECTED. Furthermore, a proposal RISKS BEING REJECTED for any of the following reasons:

1. The application or documents submitted are incomplete, filed late, or not responsive to the requirements of this code.
2. The issuance of the permit or operation of the commercial cannabis business at the proposed location is inconsistent with State law, Chapter 5.44, or other applicable City of Union City Municipal Codes.

CONTACT:

If you have any questions or would like an update on the status of your application, please contact (Joan Malloy at 510-675-5319) or by email at Jmalloy@unioncity.org.

	<p align="center"> Union City Economic & Community Development Department </p>	<p align="center">FEE PAID \$ _____</p>
	<p align="center"> 34009 Alvarado-Niles Road, Union City, CA 94587 Tel: 510-675-5319 Email: jmalloy@unioncity.org </p>	<p align="center">DATE STAMP HERE</p>

COMMERCIAL CANNABIS BUSINESS PERMIT APPLICATION FORM

Business Name: _____

Business Primary Contact: _____

Contact Title: _____

Contact's Mailing Address: _____

Phone #: _____ **E-mail:** _____

24-Hour Contact Information: _____

Type(s) of Permit Being Requested: _____

Please select from one or more of the following categories for which you are applying for a Commercial Cannabis Business Permit.

- ☐ Cultivation
- ☐ Distribution
- ☐ Manufacturer
- ☐ Retailer-Store Front
- ☐ Retailer- None Store Front
- ☐ Testing Lab
- ☐ Please check this box to indicate whether there are other related applications

For details about the information required as part of the application process, please see the Implementation Procedures to Operate a Commercial Cannabis Business in Union City, Ordinance No. XX-XX and additional requirements to complete the application process. All these documents can be found on the Union City webpage: www.ci.union-city.ca.us

Phase II**Section A: Principal Background Information (Must be signed by all Principals)**

Under penalty of perjury, I acknowledge that I have personal knowledge of the information stated in this application and that the information contained herein is true. I also understand that the information provided in this application, except the Safety and Security Plan in Section C and certain confidential information such as driver's license and social security number which can be redacted, may be public information and subject to disclosure under the California Public Records Act.

Principal Name: _____

Principal Title: _____

Principal Home or Cell Phone: _____

Principal Home Address: _____

Principal Signature: _____ **Date:** _____

Attachments:

____ Receipt from background check (Live Scan)

____ Picture of applicant (two passport quality photographs 2X2)

____ Copy of Social Security Card

____ Copy of Driver's License, or DMV issued ID Card, or Passport

____ Proof of address (DMV-issued ID/driver's license, and/or recent utility bill under Principal's name)

Staff use only: Pass background check

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Principal Name: _____

Principal Title: _____

Principal Home or Cell Phone: _____

Principal Home Address: _____

Principal Signature: _____ **Date:** _____

Attachments:

____ Receipt from background check (Live Scan)

____ Picture of applicant (two passport quality photographs 2X2)

____ Copy of Social Security Card

____ Copy of Driver's License, or DMV issued ID Card, or Passport

____ Proof of address (DMV-issued ID/driver's license, and/or recent utility bill under Principal's name)

Staff use only: Pass background check

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Principal Name: _____

Principal Title: _____

Principal Home or Cell Phone: _____

Principal Home Address: _____

Principal Signature: _____ Date: _____

Attachments:

____ Receipt from background check (Live Scan)

____ Picture of applicant (two passport quality photographs 2X2)

____ Copy of Social Security Card

____ Copy of Driver's License, or DMV issued ID Card, or Passport

____ Proof of address (DMV-issued ID/driver's license, and/or recent utility bill under Principal's name)

Staff use only: Pass background check

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Add more pages as necessary to accommodate signatures of all Commercial Cannabis Business Principals.

1. List whether, the applicant(s) has other licenses and/or permits issued to and/or revoked from the applicant, in the three years prior to the year of the permit application, such other licenses and or permits relating to similar business activities as in the permit application. If yes, please list the type, current status, issuing/denying for each license/permit. (Please attach a separate document explanation if necessary)

2. List any and all partners who have been convicted of a felony, or has engaged in misconduct that is substantially related to the qualifications, functions or duties of a commercial cannabis operator, applicant, owner or employee. A conviction within the meaning of this section means a plea or verdict of guilty, or a conviction following a plea of nolo contendere. (Please attach a separate document explanation if necessary)

Section B: Business Organization Status

1. Describe the Commercial Cannabis Business organizational status:

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Attach proof of status, such as articles of incorporation, by-laws, partnership agreements, and other documentation as may be appropriate or required by the City.

Section C: Commercial Cannabis Business Description and Location

1. Statement of Purpose of the Commercial Cannabis Business (a separate sheet may be attached):

2. Proposed Location and APN # of Business: _____

3. Name and address of property owner: _____

4. Name and address of school closest to Proposed Location: _____

5. Name and address of existing alcohol related establishment closest to Proposed Location:

6. Have you received a Zoning Verification Letter? (Please check the appropriate response)

Yes _____ (If yes, include documentation with this section of the application) No _____

7. Description of neighborhood around the proposed location (surrounding uses, nearby sensitive uses (such as schools, youth center, churches, parks, daycares, or libraries), transit access to site, etc. A separate sheet may be attached.
-
-
-
-
-

8. Site plan must be dimensioned and show the entire parcel including parking and additional structures. In addition, please, show elevations and photos of proposed location (Attach to application). If any exterior alterations are proposed for the existing building, also attach proposed site plans (accurate, dimensioned and to-scale [minimum scale of $\frac{1}{4}$ "]) should be included for each potential location and elevations.

9. Floor Plans (Attach to application accurate, dimensioned and to-scale [minimum scale of $\frac{1}{4}$ "]) should be included for each potential location). If any interior alterations are proposed for the existing building, also attach proposed floor plans.

10. Signage Plan.

11. Vicinity Map.

12. Photos of the site and building(s).

Section D: Required supplemental information

This information is required for this application to be considered complete. Attach the following reports to the application. For explanation about the information required, see the Implementation Procedures handout.

- ☐ Business Plan
- ☐ Neighborhood Compatibility Plan
- ☐ Safety and Security Plan

PHASE III

Section E: Final Location Information

Attach proof of ownership of the site OR signed and notarized statement from the owner.

Section F: Essential Supplemental Information

This information is required and you must submit this as part of meeting the requirements for a completed application. Check the box evidencing that you have read the Description of Evaluation Criteria related to these specific categories in the Implementation Procedures and attach the relative report(s) to the application.

- ☐ Air Quality Plan
- ☐ Enhanced Product Safety
- ☐ Environmental Benefits
- ☐ Community Benefits
- ☐ Labor and Employment
- ☐ Local Enterprise
- ☐ Qualifications of Principals

Staff use only:

Date of initial application: _____

Number assigned to application: _____

Date fee received for Phase II: _____

Date application reviewed for Phase II: _____

Points Awarded in Phase II: _____

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Continued to Phase III

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Denied

Date fee received for Phase III: _____

Date Proof of ownership was verified or a signed and notarized statement from the property owner was received for Phase III: _____

Date application reviewed for Phase III: _____

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Approved

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Denied

Date fee received for Phase IV: _____

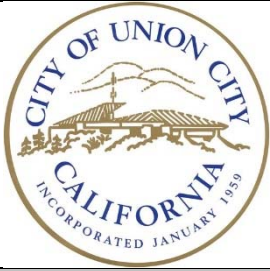
Date application reviewed for Phase IV: _____

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Approved

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Denied



CITY OF UNION CITY

**Commercial Cannabis Business
Employee/Owner Background Application**

34009 Alvarado-Niles Rd.
Union City, CA 94587
(510) 675-5319

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COMMERCIAL CANNABIS BUSINESS APPLICANT INFORMATION

Name as Shown On Application →	LAST NAME ON APPLICATION	FIRST NAME ON APPLICATION	MIDDLE NAME ON APPLICATION
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APPLICANT INFORMATION

Social Security Number → [] →	LAST NAME ON SOCIAL SECURITY CARD	FIRST NAME ON SOCIAL SECURITY CARD	MIDDLE NAME ON SOCIAL SEC. CARD
California Driver's License → [] →	LAST NAME ON CALIFORNIA DRIVER'S LICENSE	FIRST NAME ON CAL. DRIVER'S LICENSE	MIDDLE NAME ON CAL. DRIVER'S LIC.

SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	AGE	DATE OF BIRTH	RACE	HEIGHT	WEIGHT	HAIR	EYES
LIST YOUR CURRENT HOME ADDRESS, CITY, ZIP CODE (<u>NO P.O. BOXES ALLOWED</u>)						CELL PHONE #	
LIST ANY OTHER NAMES YOU HAVE EVER USED (Maiden, Married, Nicknames, etc.)				BIRTH COUNTRY/STATE		LANGUAGES SPOKEN	

CRIMINAL HISTORY

List all arrest or convictions other than infractions for traffic violations IF ADDITIONAL SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS TO THE APPLICATION. **PLEASE NOTE ANY FALSE STATEMENTS, MISLEADING STATEMENTS OR OMISSIONS ON THIS APPLICATION OR ON THE CCB PERMIT SHALL BE GROUNDS FOR DISQUALIFICATION.**

1	ARREST DATE	ARRESTING AGENCY / LOCATION / COURT NAME	CHARGE / REASON FOR ARREST
	DISPOSITION (WHAT WAS THE OUTCOME OF THE CASE: Were you sentenced? Did you have to pay a fine? Probation? Parole? Etc.)		
2	ARREST DATE	ARRESTING AGENCY / LOCATION / COURT NAME	CHARGE / REASON FOR ARREST
	DISPOSITION (WHAT WAS THE OUTCOME OF THE CASE: Were you sentenced? Did you have to pay a fine? Probation? Parole? Etc.)		
3	ARREST DATE	ARRESTING AGENCY / LOCATION / COURT NAME	CHARGE / REASON FOR ARREST
	DISPOSITION (WHAT WAS THE OUTCOME OF THE CASE: Were you sentenced? Did you have to pay a fine? Probation? Parole? Etc.)		

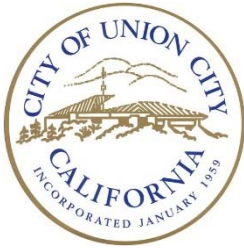
STATEMENT OF PERJURY

I DECLARE UNDER THE PENALTY OF PERJURY, UNDER THE LAWS OF THE STATE OF CALIFORNIA AND THE CITY OF UNION CITY, THAT THE FOREGOING IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

APPLICANT'S SIGNATURE x	JOB TITLE (POSITION ON THE APPLICATION)	DATE
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CITY STAFF USE ONLY

DATE / TIME	\$ FEE AMOUNT PAID	\$ RECEIPT #	CITY STAFF'S NAME	CITY DEPARTMENT
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CITY OF UNION CITY
Commercial Cannabis Business
Employee/Owner Background Information

34009 Alvarado-Niles Rd.
Union City, CA 94587
(510) 675-5319

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ADDITIONAL ARREST INFORMATION

ARREST DATE	ARRESTING AGENCY / LOCATION / COURT NAME	CHARGE / REASON FOR ARREST
DISPOSITION (WHAT WAS THE OUTCOME OF THE CASE: Were you sentenced? Did you have to pay a fine? Probation? Parole? Etc.)		
ARREST DATE	ARRESTING AGENCY / LOCATION / COURT NAME	CHARGE / REASON FOR ARREST
DISPOSITION (WHAT WAS THE OUTCOME OF THE CASE: Were you sentenced? Did you have to pay a fine? Probation? Parole? Etc.)		
ARREST DATE	ARRESTING AGENCY / LOCATION / COURT NAME	CHARGE / REASON FOR ARREST
DISPOSITION (WHAT WAS THE OUTCOME OF THE CASE: Were you sentenced? Did you have to pay a fine? Probation? Parole? Etc.)		

LIST ALL REGULATED ONLY COMMERCIAL CANNABIS EMPLOYMENT HISTORY

BUSINESS NAME	CITY / STATE	PHONE	START DATE	END DATE

BACKGROUND INVESTIGATION RELEASE

To Whom It May Concern:

I am an applicant/employee with a Commercial Cannabis Business in the City. I desire and request the City Manager, or Chief of Police of the City of Union City, and/or his/her agents, employee or lawful representative(s) to take my photograph and fingerprints or use the information in this application for the purpose of conducting a background check to verify that I meet the qualifications required to obtain a Commercial Cannabis Business Permit to operator or to be employed with such business as required by the City Municipal Code and/or State Law.

I agree to provide any information requested or deemed necessary to provide the State of California Department of Justice and the Federal Bureau Investigation, or any other law enforcement agency or third party consultant authorized by the City Manager or Chief of Police.

I understand this will serve to disclose any record of arrests to which I have been the subject that resulted in conviction. I further agree to hold the City of Union City, its officers, agents, or lawfully delegated representatives, harmless from any action(s), or damages whatsoever or at all, which may result from the taking of such fingerprints or forwarding them to the appropriate law enforcement agency for a record's check and/or obtaining access to any other documentation which pertains to meeting the qualification for a Commercial Cannabis Business Permit or Employee Permit.

By signing this form I am acknowledge and agree to comply with all the conditions and terms of this application. I also understand that falsifying and/or omitting any information on this application may be grounds for denial of a permit or is grounds for termination of employment per the Union City Ordinance.

APPLICANT'S SIGNATURE	DATE	PERSON REVIEWING APPLICATION:	DATE
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